

Docket No.: 5000-0148PUS1
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Anja SCHWOGLER et al.

Application No.: 10/564,013

Confirmation No.: 3742

Filed: January 9, 2007

Art Unit: 1624

For: 2-SUBSTITUTED PYRIMIDINES

Examiner: D. R. Rao

REQUEST FOR REFUND
(IMPROPER CHARGE OF DEPOSIT ACCOUNT)

MS 16
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

I. REFUND REQUEST

This is a request for a refund with respect to the charge to Deposit Account 02-2448 shown on the statement for the month of December 2007 for the above-identified

☒ application ☐ patent

☒ A copy of the monthly statement in which the error referred to occurs, accompanies this request.

II. FEES CHARGED FOR WHICH REFUND REQUESTED

	AMOUNT OF REFUND <u>REQUESTED</u>
<input type="checkbox"/> filing fee	_____
<input type="checkbox"/> search fee	_____
<input type="checkbox"/> examination fee	_____
<input type="checkbox"/> surcharge for filing the basic filing on a date later than the filing date of the application (37 C.F.R. § 1.16(e))	_____
and/or	
<input type="checkbox"/> surcharge for filing the oath or declaration on a date later than the filing date of the application (37 C.F.R. § 1.16(e))	_____
<input type="checkbox"/> extension of term	
<input type="checkbox"/> first month	_____
<input type="checkbox"/> second month	_____
<input type="checkbox"/> third month	_____
<input type="checkbox"/> fourth month	_____
<input checked="" type="checkbox"/> excess claims	<u>210.00</u>
<input type="checkbox"/> issue fee	_____
<input type="checkbox"/> petition fee	_____

<input type="checkbox"/>	patent maintenance fee	_____
<input type="checkbox"/>	first maintenance fee	_____
<input type="checkbox"/>	second maintenance fee	_____
<input type="checkbox"/>	third maintenance fee	_____
<input type="checkbox"/>	patent maintenance fee surcharge	_____
<input type="checkbox"/>	Other:	_____

TOTAL REFUND REQUESTED _____

III. EXPLANATION OF WHY CONTESTED CHARGE IS IN ERROR

There are only three (3) independent claims, not four and therefore, no additional fees for independent claims are due.

IV. MANNER OF REFUND

Please make refund by crediting Account No. 02-2448.

We respectfully request that the attached copy of this letter be returned to us with an indication that the credit has been processed.

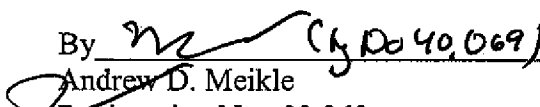
Application No.: 10/564,013

Docket No.: 5000-0148PUS1

Dated: March 7, 2008

Respectfully submitted,

By


Andrew D. Meikle

Registration No.: 32,868

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Falls Church, Virginia 22040-0747

(703) 205-8000

Attorney for Applicant

Attachment(s)



**United States
Patent and
Trademark Office**

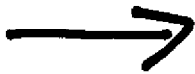
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Deposit Account Statement

Requested Statement Month: December 2007
Deposit Account Number: 022448
Name: BIRCH STEWART KOLASCH & BIRCH
Attention:
Street Address 1: 8110 GATEHOUSE ROAD
Street Address 2: SUITE 500 EAST
City: FALLS CHURCH
State: VA
Zip: 22042
Country: UNITED STATES

DATE	SEQ	POSTING REF TXT	ATTORNEY DOCKET NBR	FEE CODE	AMT	BAL
12/03	1093	10252595	0717-0892P	1251	\$120.00	\$405,093.00
12/03	1	11976416	1921-0187PUS1	1202	\$1,000.00	\$404,093.00
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12/03	1869	11913053	1248-0960PUS1	8021	\$40.00	\$403,553.00
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12/07	10722	11916837	0033-1184PUS1	1633	\$210.00	\$358,072.00
12/07	10721	11916837	0033-1184PUS1	1642	\$410.00	\$357,662.00
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12/07	2	10564013	5000-0148PUS1	1201	\$210.00	\$355,272.00
12/07	10815	11012219	0365-0617PUS1	1501	\$1,440.00	\$353,832.00
12/07	10817	11012219	0365-0617PUS1	8001	\$12.00	\$353,820.00
12/07	10816	11012219	0365-0617PUS1	1504	\$300.00	\$353,520.00
12/07	10916	11319386	2019-0236PUS2	2501	\$720.00	\$352,800.00
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12/07	10919	11319386	2019-0236PUS2	8001	\$12.00	\$352,488.00
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12/07	11200	11952283	0171-1079PUS2	1311	\$210.00	\$351,458.00
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12/07	11922	29271689	0465-1746PUS1	8001	\$12.00	\$347,436.00
12/07	12055	11085179	0965-0442PUS1	1251	\$120.00	\$347,316.00



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875					Application or Docket Number 10/564,013		Filing Date 01/09/2007		<input type="checkbox"/> To be Mailed	
APPLICATION AS FILED – PART I										
(Column 1)			(Column 2)		SMALL ENTITY <input type="checkbox"/>		OR		OTHER THAN SMALL ENTITY	
FOR	NUMBER FILED	NUMBER EXTRA	RATE (\$)	FEE (\$)			RATE (\$)	FEE (\$)		
<input type="checkbox"/> BASIC FEE (37 CFR 1.16(a), (b), or (c))	N/A	N/A	N/A				N/A			
<input type="checkbox"/> SEARCH FEE (37 CFR 1.16(k), (l), or (m))	N/A	N/A	N/A				N/A			
<input type="checkbox"/> EXAMINATION FEE (37 CFR 1.16(o), (p), or (q))	N/A	N/A	N/A				N/A			
TOTAL CLAIMS (37 CFR 1.16(l))	minus 20 =	*	X \$	=	OR		X \$	=		
INDEPENDENT CLAIMS (37 CFR 1.16(h))	minus 3 =	*	X \$	=			X \$	=		
<input type="checkbox"/> APPLICATION SIZE FEE (37 CFR 1.16(s))			If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))										
* If the difference in column 1 is less than zero, enter "0" in column 2.										
APPLICATION AS AMENDED – PART II										
(Column 1)			(Column 2)		(Column 3)		SMALL ENTITY		OR OTHER THAN SMALL ENTITY	
AMENDMENT	11/30/2007	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE (\$)	ADDITIONAL FEE (\$)			RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16(j))	* 14	Minus	** 20	=	0	OR		X \$50=	0
	Independent (37 CFR 1.16(h))	* 4	Minus	*** 3	=	1	OR		X \$210=	210
	<input type="checkbox"/> Application Size Fee (37 CFR 1.16(s))									
	<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									
					TOTAL ADD'L FEE	OR		TOTAL ADD'L FEE	210	
(Column 1)			(Column 2)		(Column 3)		SMALL ENTITY		OR OTHER THAN SMALL ENTITY	
AMENDMENT	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE (\$)	ADDITIONAL FEE (\$)			RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(j))	*	Minus	**	=	OR		X \$	=	
	Independent (37 CFR 1.16(h))	*	Minus	***	=	OR		X \$	=	
	<input type="checkbox"/> Application Size Fee (37 CFR 1.16(s))									
	<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									
					TOTAL ADD'L FEE	OR		TOTAL ADD'L FEE		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										

Legal Instrument Examiner:
/WANDA MEREDITH/

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Document code: WFEE

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